PTO/SB/17 (10-08)

Date May 11, 2010

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Effective on 12/08/2004.				Complete if Known					
FEE TRANSMITTAL				Application Number 10/560			0,138		
				Filing Date Marc		March 7, 2	arch 7, 2007		
For FY 2009				First Named Inventor David		David Ber	vid Bergman		
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name Jacqu		Jacquelin	queline A. Diramio		
			[	Art Unit 1641		1641	1		
TOTAL AMOUNT OF PAYM	IENT (	\$) 810.00	[	Attorney Docket N	No. 3	3044373	US01		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
✓ Deposit Account Deposit Account Number: 50-3010 Deposit Account Name: Hiscock & Barclay, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
nformation and authorization of	n PTO-20	38.							
FEE CALCULATION									
1. BASIC FILING, SEAR				011 8550			FFFC		
	Small Entity			CH FEES EXAMII Small Entity		INATION FEES Small Entity			
Application Type	Fee (\$)	Fee (\$)	ee (\$)	Fee (\$)	Fee (	\$) Fee	(\$)	Fees Paid (\$)	
Utility	330		540	270	220				
Design	220		100	50	140	,			
Plant	220		330	165	170	-	-		
Reissue	330		540	270	650	-			
Provisional	220	110	0	0	0	' '	0		
2. EXCESS CLAIM FEES Fee Description Fee (\$)								Small Entity Fee (\$)	
Each claim over 20 (including Reissues)							52	26	
Each independent claim over 3 (including Reissues)							220	110	
Multiple dependent claims  Total Claims							390	195 pendent Claims	
Total Claims - 20 or HP ≈	Extra Cla	aims Fee (\$) x =	ree	Paid (5)			ee (\$)	Fee Paid (\$)	
HP = highest number of total		for, if greater than 20.				-			
Indep. Claims - 3 or HP =	Extra Cla		Fee	Paid (\$)					
HP = highest number of indep	endent clai	ms paid for, if greater than	13.						
. APPLICATION SIZE F	EE								
If the specification and listings under 37 CF	drawing:	s exceed 100 sheets	of par	per (excluding el	ectron 25 for	ically life	a seque	nce or computer	
sheets or fraction the	R 1.52(6	e)), the application si	VGV	and 37 CFR 1 16	(9)	Sinaii Cii	1119) 101	each additional 50	
<u>Total Sheets</u> - 100 =	Extra Sh	/50 =	of eac	h additional 50 or (round up to a wh	fractio	n thereof mber) x	Fee	(\$) Fee Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)									
Other (e.g., late filing surcharge): Request for Continued Examination (RCF) Filing Fee \$810.00									
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JBMITTED BY	10	Junales	- 1	Registration No. 35			Telenbo	ne 315-425-2700	
gnature Witte	7/19	unsler		(Attorney/Agent) 35	,067		, cichilo	~ 315-425-2700	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, USH LU DI process) an application. Londerhalding a governed by 50 USC. 172 and 3 / CIPK 114. This conscious resimilated to take 30 milled 10 control and 10 milled 10 comprised to take 30 milled 10 control and 10 milled 10 comprised to take 30 milled 10 control and 10 milled 10 comprised to take 30 milled 10 control and 10 milled 10 comprised to take 30 milled 10 control and 10 milled 10 comprised to take 30 milled 10 control and 10 10 control an

Name (Print/Type) Peter J. Bilinsk